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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. §1.53(b))		Attorney Docket No.		706773US1		
		First Inventor or Application Identifier		James R Klotz		
		Title	Rocker System for an Internal Combustion Engine			
		Express Mail Label No.		EV026309810US as deposited on: 11/25/03		
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.			ADDRESS TO: MS Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450			
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)			5. <input type="checkbox"/> Microfiche Computer Program (Appendix)			
2. <input checked="" type="checkbox"/> Specification [Total Pages <u>11</u>] (preferred arrangement set forth below) -Descriptive title of the Invention -Cross References to Related Applications -Statement Regarding Fed Sponsored R&D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claims(s) -Abstract of the Disclosure			6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies			
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>5</u>]			ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.37(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard MPEP 503) 13. <input type="checkbox"/> Statement (s) <input type="checkbox"/> Statement filed in prior (PTO/SB/09-12) application, Status still proper and desired 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:			
4. Oath or Declaration [Total Pages <u>2</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed)						
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) Named in the prior application, see 37 C.F.R. § 1.63(d)(2) and 1.33 (b).						
*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).						
16. If a CONTINUING APPLICATION , Check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____ Prior application information: Examiner _____ FOR CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
17. CORRESPONDENCE ADDRESS						
<input type="checkbox"/> Customer Number or Bar Code Label 24938 or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)						
Name	Thomas A Jurecko					
	DaimlerChrysler Intellectual Capital Corporation					
Address	CIMS 483-02-19					
	800 Chrysler Drive East					
City	Auburn Hills	State	Michigan	Zip Code	48326-2757	
Country	United States	Telephone	944-6525	Fax	(248) 944-6537	

Name (Print or Type)	Thomas A Jurecko	Registration No.	48,392
Signature		Date	NOVEMBER 25, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

17302 U.S. PTO

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FEE TRANSMITTAL**For FY 2001**

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete if Known

Application Number	
Filing Date	
First Named Inventor	James R Klotz
Examiner Name	
Group / Art Unit	
Attorney Docket No.	706773US1

TOTAL AMOUNT OF PAYMENT (\$) 770**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-1800
Deposit Account Name DaimlerChrysler Intellectual Capital Corporation

- ☒ Charge Any Additional Fee Required Under
37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
1001	2001	770	385	Utility filing fee	770
1002	2002	340	170	Design filing fee	
1003	2003	530	265	Plant filing fee	
1004	2004	770	385	Reissue filing fee	
1005	2005	160	80	Provisional filing fee	
SUBTOTAL (1)					770

2. EXTRA CLAIM FEES

Total Claims	Extra Claim	Fee from below	Fee Paid
9	-20** = 0	0	0
Independent Claims	1	- 3** = 0	0
Multiple Dependent		0	0

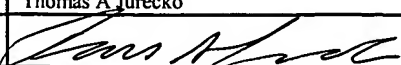
**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
1202	2202	18	9	Claims in excess of 20
1201	2201	86	43	Independent claims in excess of 3
1203	2203	290	145	Multiple dependent claim, if not paid
1204	2204	86	43	** Reissue independent claims over original patent
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$) 0				

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge-late filing fee or oath	
127	227	50	25	Surcharge-late provisional filing fee or cover sheet	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for examination	
112	112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	390	195	Extension for reply within second month	
117	217	890	445	Extension for reply within third month	
118	218	1,390	695	Extension for reply within fourth month	
128	228	1,890	945	Extension for reply within fifth month	
119	219	310	155	Notice of Appeal	
120	220	310	155	Filing a brief in support of an appeal	
121	221	270	135	Request for oral hearing	
138	138	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive – unavoidable	
141	241	1,240	620	Petition to revive – unintentional	
142	242	1,240	620	Utility issue fee (or reissue)	
143	243	440	220	Design issue fee	
144	244	600	300	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	50	50	Petitions related to provisional applications	
126	126	180	180	Submission of Information Discl. Stmt.	
581	581	40	40	Recording of each patent assignment per property (times number of properties)	
146	246	710	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	249	710	355	For each additional invention to be examined (34 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					
* Reduced by Basic Filing Fee Paid SUBTOTAL (3)					(\$) 0

SUBMITTED BY

Typed or Printed Name	Thomas A Jurecko	Date	November 27, 2000	Complete (if applicable)	Reg. Number	48,392
Signature				Deposit Account User ID		